PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-0835	2. Article Number (Transfer from service label)	1 1 1 1 2 0 000 / 11 7000 /	P.O. BOX 90043	FEDERAL CORR. COMPLEX	03582-061	MAURICE JOVETT	1. Adicle Addressed to:	Attach this card to the back of the mailpiece, So on the front if space permits.	Hint your name and address on the reverse	SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete	D	ocument 5
	7002 0860 0000 1409 0951	4. Restricted Delivery? (Extra Fee) ☐ Yes	© Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	3. Service Type			D. Is delivery address different from item 1? Lives if YES, enter delivery address below: D No	Acceledate (Printed Name) C. Date of Delivery	X Agent	COMPLETE THIS SECTION ON DELIVERY A. Signatule		

102595-02-M-0835